2006 REINSTATEMENT

APPROVED AND FILED

06 MAY 22 PM 4:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1 of 2

# FOR PROFIT CORPORATION
~~(UNIFORM BUSINESS REPORT (UBR))~~

DOCUMENT # P03000113400

1. Entity Name

DPC EXPRESS CORP

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

17011 NORTH BAY ROAD
Suite, Apt. #, etc.
#905
City & State
NORTH MIAMI BEACH FL
Zip 33160 Country USA

3. Mailing Address

Suite, Apt. #, etc.
City & State
Zip Country

**REINSTATEMENT** 05-06 DSC
DO NOT WRITE IN ~~THIS SPACE~~

4. FEI Number ☑ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name ANABEL DIAZ
Street Address (P.O. Box Number is Not Acceptable)
17011 NORTH BAY ROAD #905
City NORTH MIAMI BEACH FL Zip Code 33160

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Anabel Diaz
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

100075561931
05/31/06--01033--017 **300.00

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | PD |
| NAME | ANABEL DIAZ |
| STREET ADDRESS | 17011 NORTH BAY ROAD #905 |
| CITY-ST-ZIP | NORTH MIAMI BEACH FL 33160 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
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CR2E034B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all blanks like empowered.

SIGNATURE: Anabel Diaz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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Division of Corporations
P.O. BOX 6327
Tallahassee, FL 32314

Per instructions from the Division of Corporations, I am attaching a check, in the amount of $300.00 for the annual report fee with my application.

We did not receive the U.B.R. for the years 2005-2006 or any other notice from the Division of Corporations in respect with the Corporation **DPC EXPRESS CORP.**

Thank you for your courtesy in this matter.

Anabel Diaz

**ANABEL DIAZ**
**PRESIDENT**